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BIBDATASHEET

CONFIRMATION NO. 3495

Bib Data Sheet

SERIAL NUMBER 10/642,675	FILING DATE 08/19/2003 RULE	CLASS 340	GROUP ART UNIT 2632	ATTORNEY DOCKET NO. 02-359
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** CONTINUING DATA *****

N/A

** FOREIGN APPLICATIONS *****

N/A

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** SMALL ENTITY **

** 01/28/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MD	SHEETS DRAWING 4	TOTAL CLAIMS 34	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged Examiner's Signature	Initials		

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TITLE

Remote temperature monitoring apparatus

FILING FEE RECEIVED 650	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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